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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	JAGODA, CHUCK, , ,									
	(b) Address (number and street) 495 North Wolfe Road Suite 317	ess changed		Candidate's FEC Identification Number S0WY00111						
	(c) City, State, and ZIP Code						New	Α	Amended	
	Sunnyvale		CA	9408	35	Statement X	(N) OR	(,	A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate				
	DEMOCRATIC PARTY	Senate			WY	00				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) CHUCK JAGODA WORKING FOR WYOMING										
(b) Address (number and street) 495 North Wolfe Road Suite 317										
	(c) City, State, and ZIP Code									
	Sunnyvale				CA	94085				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my										
candidacy.										
NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full)										
(b) Address (number and street)										
(c) City, State, and ZIP Code										
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Signature of Candidate Date										
JA	AGODA, CHARLES, , ,	[Electronically Filed]				06/09/2019				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
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\Box										

FEC FORM 2 (REV. 02/2009)